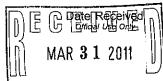
# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

### STATEMENT OF ECONOMIC INTERESTS

PRACTICOVER PAGEION



11 APR 11 AM 10:38 Please type or print in ink. NAME OF FILER (LAST) (MIDDLE) ELFINO KENWETH 1. Office, Agency, or Court Agency Name CITY of COCFAX

Division, Board, Department, District, if applicable Your Position MATUR COUNCIL ▶ If filing for multiple positions, list below or on an attachment. Agency: SEDCorp Position: DIRECTOR / VICE - CAHAMANA 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge (Statewide Jurisdiction) M County of REACER SIERRA NEWASA (ELOCADO) ■ Multi-County \_ City of COLFAX Other . 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2010, through December 31, Leaving Office: Date Left \_\_\_\_/\_\_\_\_ 2010. (Check one) O The period covered is January 1, 2010, through the date of The period covered is \_\_\_\_/\_\_\_, through December 31, leaving office. O The period covered is \_\_\_\_\_\_\_, through the date Assuming Office: Date \_\_\_\_/\_\_\_\_ of leaving office. Candidate: Election Year \_\_\_\_ Office sought, if different than Part 1: \_ 4. Schedule Summary Check applicable schedules or "None." ► Total number of pages including this cover page: \_ Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule herein and in any attached schedules is true and complete. I acknowledge this is a I certify under penalty of perjury under the laws of the State of California that Date Signed 31 March 2011 Signature

#### SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

Name KGN DELAND

CALIFORNIA FORM

(Ownership Interest is 10% or Greater)

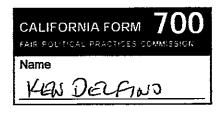
► 1. BUSINESS ENTRLY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
K.M. D. ASARDS of COLFAX	
Name 999 PINE ST, COLFAX, CA 95713-1690	Name
Address	Address
Check one	Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:
T e2 000 \$40 000	\$2,000 - \$10,000
\$10,001 - \$100,000 <u>  2   01   -98 25   0     08     10   10   10   10   10  </u>	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF JAVESTMENT
Sole Proprietorship 🕅 Partnership 🔲	Sole Proprietorship Partnership
YOUR BUSINESS POSITION PRESIDENT Other	YOUR BUSINESS POSITION
TOUR BUSINESS FOSITION _F15 US. V US.	TOUR BUSINESS PUSITION
NO STRUCTURE CROSS A COMP RESERVED AND COMP RESERVED.	A A CONTRACTOR ADDRESS ASSESSMENT ACCOUNTS ASSESSMENT ACCOUNT ACCOUNTS ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ACCOUNTS ASSESSMENT ASSESSMENT ASSESSMEN
2. IDENTIFY THE GROSS INCOME RECEIVED INCOUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY TRUST	<ul> <li>2. DENTIFY THE GROSS (NOOME RECEIVED - NOLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY TRUST)</li> </ul>
\$0 - \$499 \$10,001 - \$100,000	☐ \$0 - \$499 ☐ \$10,001 - \$100,000
\$500 - \$1,000   OVER \$100,000	\$500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	\$1,001 - \$10,000
► 3. UST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	► ELLIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE THAT I THE STATE OF THE	INCOME OF \$10,000 OR MORE when a service creation of
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE	
BUSINESS ENTITY OR TRUST	► 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT 🔀 REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
DAD PULL OF DICAL DA	
999 PINE ST, COLFAX, OF	
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
<u> </u>	1
There was minute Com	
HOME-BASED TROPHY SHAP	
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or  City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$\overline{\text{X}}\$ \$10,001 - \$100,000 \tag{/} \tag{08}	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	MATURE OF INTEREST
Property Ownership/Deed of Trust Stock Repartnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
	Toom Transland
Leasehold Other	Leasehold Other
Yrs. remaining	Yrs. remaining
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	EDDO Esse 700 (2000/2000) Sab. 8.2

## **SCHEDULE B** Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name ICEN DELFIND		

STREET ADDRESS OR PRECISE LOCATION	
100 a	► STREET ADDRESS OR PRECISE LOCATION
999 PINE ST	
CITY	CITY
COLFAX CA	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000/	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
The solitaining Sure	
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	\$0 - \$499 \Big \$500 - \$1,000 \Big \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater	SOURCES OF RENTAL INCOME: If you own a 10% or greater
interest, list the name of each tenant that is a single source of	interest, list the name of each tenant that is a single source of
income of \$10,000 or more.	income of \$10,000 or more.
•	
of business on terms available to members of the p	al lending institutions made in the lender's regular course public without regard to your official status. Personal loans of business must be disclosed as follows:
	public without regard to your official status. Personal loans
of business on terms available to members of the pand loans received not in a lender's regular course	oublic without regard to your official status. Personal loans of business must be disclosed as follows:
of business on terms available to members of the p and loans received not in a lender's regular course NAME OF LENDER*	oublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*
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of business on terms available to members of the p and loans received not in a lender's regular course NAME OF LENDER*	oublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*
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of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	nublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
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of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	nublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  FERM (Months/Years)	nublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	nublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
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of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  FERM (Months/Years)	nublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  **REM (Months/Years)  None	Dublic without regard to your official status. Personal loans of business must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  **ERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD	Dublic without regard to your official status. Personal loans of business must be disclosed as follows:    NAME OF LENDER*
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  **ERM (Months/Years)  HIGHEST BALANCE BURING REPORTING PERIOD  \$500 - \$1,000  \$10,001 - \$100,000  OVER \$100,000	Dublic without regard to your official status. Personal loans of business must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  **ERM (Months/Years)  HIGHEST BALANCE BURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  **ERM (Months/Years)  HIGHEST BALANCE BURING REPORTING PERIOD  \$500 - \$1,000  \$10,001 - \$100,000  OVER \$100,000	Dublic without regard to your official status. Personal loans of business must be disclosed as follows:    NAME OF LENDER*
of business on terms available to members of the pand loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  **ERM (Months/Years)  HIGHEST BALANCE BURING REPORTING PERIOD  \$500 - \$1,000  \$10,001 - \$100,000  OVER \$100,000	Dublic without regard to your official status. Personal loans of business must be disclosed as follows:    NAME OF LENDER*

#### SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements



- · Reminder you must mark the gift or income box.
- · You are not required to report "income" from government agencies.

NAME OF SOURCE	► NAME OF SOURCE
KIWANIS GAL-NEV-HA DIVISION 32	ADDRESS
LTG IGATHY OPININ-513 HILLPON CT	
CITY AND STATE TAFT, CA 93628	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
SPEAKEL: SAKINSFIELD, CAR	
DATE(S): 11,18,20/Q	DATE(S):
TYPE OF PAYMENT: (must check one) Gift Alincome	TYPE OF PAYMENT (must check one) Gift Income
DESCRIPTION: MILLIAGE REMENT	DESCRIPTION:
678 mi e \$.45 per mile	
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS	ADDRESS
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(\$):	DATE(S):
TYPE OF PAYMENT (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
DESCRIPTION:	DESCRIPTION:
	1
Comments: 2 Am A COUNSELOR AND C	immittel WAMMAN FIRTHE
GOVERNOON OF THE CONFORMING -NIEVAMA	9-4ALAN PASTANT OF IGHANN LAIT'E